Attorney Docket No. 1027651-000267

RECEIVED CENTRAL FAX CENTER

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of) MAIL STOP AF	MAY 1 5 2008
Mats Johansson et al.	Group Art Unit: 3721	
Application No.: 10/533,876	Examiner: THANH K. TRUON	G _.
Filing Date: May 5, 2005) Confirmation No.: 9663	
Title: SEALING DEVICE))	
).)	
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AMENDMENT/REPLY TRANSMITTAL LETTER

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 Enclosed is a reply for the above-identified patent application. 図 A Petition for Extension of Time is enclosed. Terminal Disclaimer(s) and the [] \$ 65 [] \$ 130 fee per Disclaimer due under 37 C.F.R. § 1.20(d) are enclosed. Also enclosed is/are: _ Small entity status is hereby claimed. Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the \$\Boxed{1}\$ \$ 405 \$\Boxed{1}\$\$ \$ 810 fee due under 37 C.F.R. \§ 1.17(e). Applicant(s) requests that any previously unentered after final amendments not be entered. Continued examination is requested based on the enclosed documents identified above. Applicant(s) previously submitted continued examination is requested. Applicant(s) requests suspension of action by the Office until at least , which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed. A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) (1809/2809) is also enclosed.

Buchanan Ingersoll & Rooney PC
Attorneys & Government Relations Professionals

PACE 2129 * RCVD AT STISTORS 11:21:27 PM [Eastern Daylight Time] * SVR: USPTO-EFXRF-5/19 * DNIS:2738300 * CSID:703 876 0729 * DURATION (mm-ss):04-52

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Page 2 RECEIVED

\boxtimes	No additional claim fee is required.	CENTRAL FAX CENTER
П	An additional claim fee is required, and is calculated as shown below:	MAY: 1 E 2000

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		AMENDE	D CLAIMS			
	No. of Claims	Highest No. of Claims Previously Paid For	Extra Claims	Rate	Additional Fee	
Total Claims	28	22	6	x \$ 50 (1202)	\$	300
Independent Claims	3	3	0	x \$ 210 (1201)		0
☐ If Amendment adds multiple dependent claims, add \$ 370 (1203)				\$	0	
Total Claim Amendment Fee				\$	300	
Small Entity Status claimed - subtract 50% of Total Claim Amendment Fee					0	
TOTAL ADDITIONAL CLAIM FEE DUE FOR THIS AMENDMENT				\$	300	

\boxtimes	Charge \$300.00 to Deposit Account No. 02-4800 for the fee due.
	A check in the amount of is enclosed for the fee due.
	Chargeto credit card for the fee due. Form PTO-2038 is attached
×	The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17 and 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.
	Respectfully submitted,
	BUCHANAN INGERSOLL & ROONEY PC

P.O. Box 1404 Alexandria, VA 22313-1404

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Date May 15, 2008

I hereby certify that this correspondence is being submitted by facsimile transmission to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, to the following facsimile number.

Facsimile Number: 571-273-8300

Typed Name: Matthew L. Schneider

Matthew L. Schneider Registration No. 32814

Date of Transmission: May 15, 2008

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